

INSIDER'S EDGE: Issue 157: MCHP Premium Reader Questions Answered

We're going to take a look at a few reader questions specific to the Maryland Children's Health Program (MCHP) Premium this week.



Have questions? We'll try to answer owl of them!

Question: A consumer paid for MCHP Premium for his children. He recently lost his job, and can no longer afford premiums. How does he update his income information?

Answer: To report a change in circumstances, the consumer must login to his account at www.marylandhealthconnection.gov, click *Change My Information*, and enter the appropriate change(s). Once he has entered the change(s), he should continue to click *Next* until he reaches *Submit*. He will receive a new determination of eligibility based on the newly reported income. Changes may also be made in-person at a Local Health Department or a Local Department of Social Services.

An individual or family may be eligible for Medicaid at any point in the year. In other words, children enrolled in MCHP Premium may subsequently qualify for Medicaid based on changes to their parent's income and other factors.

Question: Are MCHP Premium-enrolled children eligible for retroactive coverage?

Answer: Consumers applying for child coverage with income levels above the "free" Medicaid coverage groups (138% FPL) will not be eligible for consideration of retro coverage for the three month period prior to the month of application. Children who are determined eligible for P13, P14, D02 and D04 will receive the Fee for Service span effective the 1st of the month of application. The Premium Unit will set up the account based upon data sent over from HBX to send an initial bill for the month of processing and the on-going month to the consumer.

However, a request for retro coverage should not be refused. Staff should review the reported household income for the months retro is requested to ensure that the household is not Medicaid eligible in any retro month requested, and render a manual retro eligibility decision. If the consumer is Medicaid eligible as P06, P07, or F05 in the requested retro month(s), complete an override to give the month(s) requested. If the consumer is not Medicaid income eligible for the requested retro month(s) allow the system notice of eligibility to provide the retro denial information.



That's it for today. Hope your weekend is a hoot!

Questions? Send an email to dhmh.medicaidmarge@maryland.gov.